

1. IIA. CENTRAL SECTION

2. DIV. IIA.

MINISTRY OF HEALTH

B4-.8.37

1178/1

HASLEMERE URBAN DISTRICT

# ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

For the Year

1 9 3 6

Incorporating the Annual Report  
of the Sanitary Inspector

*Page 23 of 24*

*Noted in file*



HASLEMERE URBAN DISTRICT

---

# ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

For the Year

---

1 9 3 6

---

Incorporating the Annual Report  
of the Sanitary Inspector.

## CONTENTS

	<i>Pages</i>
STATISTICS AND SOCIAL CONDITIONS OF THE AREA ... ..	6-12
GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA	13-16
SANITARY CIRCUMSTANCES OF THE AREA ... ..	17-22
HOUSING ... ..	23 and 24
INSPECTION AND SUPERVISION OF FOOD ... ..	25 and 26
PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES ... ..	27-36

## INDEX

	<i>Page</i>
Ambulance Facilities ... ..	13
Area ... ..	6
Bakehouses ... ..	21
Bed Bugs ... ..	22
Births and Birth-Rates ... ..	7, 12
Cancer ... ..	33
Causes of Death ... ..	10
Cleansing (Public) ... ..	19
Clinics and Treatment Centres ... ..	14
Closet Accommodation ... ..	19
Deaths and Death-Rates ... ..	7, 12
Diphtheria ... ..	28
District Nurses... ..	14
Drainage and Sewerage ... ..	17
Factory and Workshops Act, 1901 ... ..	20
Food and Drugs Act, 1928 ... ..	26
Foods, Meat and Other ... ..	25
Graphs ... ..	11, 32
Health Visitors ... ..	14
Health Week ... ..	15
Hospitals ... ..	15
Houses (Inhabited) ... ..	6
Housing ... ..	23
Ice-Cream ... ..	25



	<i>Page</i>
Immunization (Diphtheria) ... ..	28
Immunization (Scarlet Fever) ... ..	27
Infant Mortality ... ..	18
Infectious Diseases ... ..	27
Laboratory Facilities ... ..	13
Maternal Mortality ... ..	8
Meat and Other Foods ... ..	25
Midwives ... ..	14
Milk Supply ... ..	25
Mortuary ... ..	16
Nursing in the Home ... ..	14
Offensive Trades ... ..	21
Petroleum (Consolidation) Act, 1928 ... ..	22
Population... ..	6
Puerperal Pyrexia ... ..	30
Rateable Value ... ..	6
Rats and Mice (Destruction) Act, 1919 ... ..	22
Rivers and Streams ... ..	17
Sanitary Inspection of District ... ..	18
Scarlet Fever ... ..	27
Schools, Sanitary Conditions of, etc. ... ..	22
Sewerage and Drainage ... ..	17
Shops Act, 1934 ... ..	21
Smoke Abatement ... ..	21
Social Conditions ... ..	7
Staff ... ..	4
Statistical Summary ... ..	6
Still-Births ... ..	7
Swimming Baths and Pools ... ..	22
Tuberculosis ... ..	34
Vital Statistics ... ..	7
Water ... ..	17
Whooping-cough ... ..	30
Zymotic Diseases ... ..	6

# Haslemere Urban District Council.

---

---

## STAFF of the PUBLIC HEALTH DEPARTMENT.

---

---

### Medical Officer of Health :

\*J. E. HAINE, M.B., Ch.B., D.P.H.

---

### Sanitary Inspector :

JAMES J. SHIRLEY, A.R.San.I., M.S.I.A.

---

### *Clerical Staff:*

#### *Health Department :*

\*G. H. C. TAYLOR (Chief Clerk).

\*Miss M. E. NUNN.

#### *Sanitary Inspector's Clerk :*

A. P. PRUE.

\* Also acts in similar capacity for Guildford Rural District  
and Hambledon Rural District.

# Haslemere Urban District Council.

---

PUBLIC HEALTH DEPARTMENT,  
MILLMEAD HOUSE,  
GUILDFORD.  
June, 1937.

*To the Chairman and Members of the Haslemere <sup>Urban</sup>~~Rural~~  
District Council.*

Mr. Chairman, Miss Hunter and Gentlemen.

I have the honour to present my Annual Report upon the health of the District for the year 1936.

Haslemere has remained singularly free of infectious disease, and can justly take pride in the records of health for the District.

The birth-rate is rather higher than last year, whilst the death-rate is decidedly lower. Compared with the country as a whole the birth-rate—as one would expect in a community such as Haslemere—is rather low, but the death-rate is decidedly below that generally found.

Once again I record my appreciation of the Council's co-operation, and the assistance of all members of the staff, which combine to make my work in Haslemere a particularly pleasant part of my duties.

Yours faithfully,

J. E. HAINE,  
*Medical Officer of Health.*

## STATISTICS & SOCIAL CONDITIONS OF THE AREA.

<b>SUMMARY.</b>	1936	1935
Area in Acres ... ..	5,945	5,945
Estimated resident population in July (estimate supplied by Registrar-General) ...	9,470	9,340
Number of Inhabited Houses (end of year) according to Rate Books ... ..	2,600	2,592
Rateable Value ... ..	£117,623	£116,971
A sum represented by a Penny Rate ... ..	£455	£450
Number of Births (legitimate and illegitimate)... ..	106	87
Birth-Rate per 1,000 of the population ...	11.19	9.31
Number of Deaths ... ..	112	119
Death-Rate (actual) per 1,000 of the population ... ..	11.80	12.74
Death-Rate for purposes of comparison with other districts ... ..	10.03	10.83
Natural increase of population during the year by excess of births over deaths ...	Nil	Nil
Number of Deaths of Infants (under the age of one year) ... ..	6	3
Infant Mortality per 1,000 live births ...	56	34
Number of women dying in, or in consequence of, child-birth ... ..	0	0
Death-Rate from Influenza per 1,000 of the population ... ..	0.21	0.43
Death Rate from Pneumonia (all forms) per 1,000 of the population... ..	0.53	0.43
Death-Rate from Bronchitis per 1,000 of the population... ..	0.53	0.86
Death-Rate from Measles per 1,000 of the population ... ..	0.0	0.0
Death-Rate from the seven principal zymotic diseases: Smallpox, Whooping-cough, Measles, Diphtheria, Diarrhœa, Scarlet Fever and "Fever" (Typhoid, Enteric and Typhus) per 1,000 of the population	0.0	0.0
Death-Rate from Diarrhœa and Enteritis of children under two years of age per 1,000 births... ..	0.0	0.0
Death-Rate from all forms of Tuberculosis per 1,000 of the population... ..	0.74	0.54
Death-Rate from Cancer per 1,000 of the population ... ..	1.27	1.49
Death-Rate from Heart Disease per 1,000 of the population... ..	2.43	2.03
Death-Rate from Acute and Chronic Nephritis per 1,000 of the population ... ..	0.42	0.54



## SOCIAL CONDITIONS.

Haslemere is largely residential in character, and the general standard of living even amongst the poorer inhabitants is reasonably good. There is no sign of under-nourishment amongst children attending the schools. There is comparatively little unemployment, the number of men and women on the registers of the Haslemere Employment Exchange being: Winter average, 30; Summer average, 8.

## VITAL STATISTICS.

### BIRTHS.

106 Live births were registered during the year, as against 87 in 1935.

	Male.	Female.	Total.
Live Births—Legitimate ...	49	49	98
Illegitimate ...	5	3	8
	—	—	—
	54	52	106
	—	—	—

BIRTH-RATE per 1,000 of the estimated  
resident population ... .. 11.19

The birth-rate for 1935 was 9.31. The 1936 rate thus shows a slight increase.

The graph on page 11 shows the birth-rates for the district for the last seven years, together with the birth-rates for England and Wales.

There were 2 still-births during the year, as against 1 in 1935.

	Male.	Female.	Total.
Still-Births—Legitimate... ..	2	0	2
Illegitimate ...	0	0	0
	—	—	—
	2	0	2
	—	—	—

Still-birth rate per 1,000 total (live and  
still) births ... .. 18.5

### DEATHS.

There were 112 deaths registered during 1936 (48 male and 64 female), as against 119 for the previous year. Table on page 10 shows the principal causes of death.

DEATH-RATE per 1,000 of the estimated  
resident population ... .. 11.80

After correction by the Registrar-General's  
factor ... .. 10.03

The death-rate for 1935 was 12.74 (or 10.38 after correction by the Registrar-General's factor). Thus the death-rate for 1936 shows a decrease of .94 per 1,000 on the rate for 1935.

The death-rates per 1,000 of the population for the last seven years, together with the death-rates for England and Wales, are shown in the graph on page 11.

The 1936 death-rates of certain specified diseases are set out in the Summary on page 6, together with the rates for 1935.

**INFANT MORTALITY.**

During 1936 there were 6 deaths of infants under one year of age as compared with 3 in 1935.

	Male.	Female.	Total.
Legitimate ... ..	3	2	5
Illegitimate ... ..	1	0	1
	—	—	—
	4	2	6
	—	—	—

INFANT MORTALITY RATES.	1936.	1935.
All infants per 1,000 live births ... ..	56.6	34.5
Legitimate infants per 1,000 legitimate live births ... ..	61.2	37.0
Illegitimate infants per 1,000 illegitimate live births ... ..	125.0	0.0

Deaths from measles (all ages) ... ..	0	0
„ whooping-cough (all ages) ...	0	0
„ diarrhoea (under 2 years of age) ... ..	0	0

MATERNAL MORTALITY.	Rate per 1,000 total (live and still) births.
Deaths from puerperal sepsis ... 0 ... ..	0.0
„ other puerperal causes 0 ... ..	0.0

Table I below shows the birth- and death-rates per 1,000 of the population for the district and for England and Wales for 1935 and 1936.

TABLE I.  
COMPARATIVE BIRTH- AND DEATH-RATES.

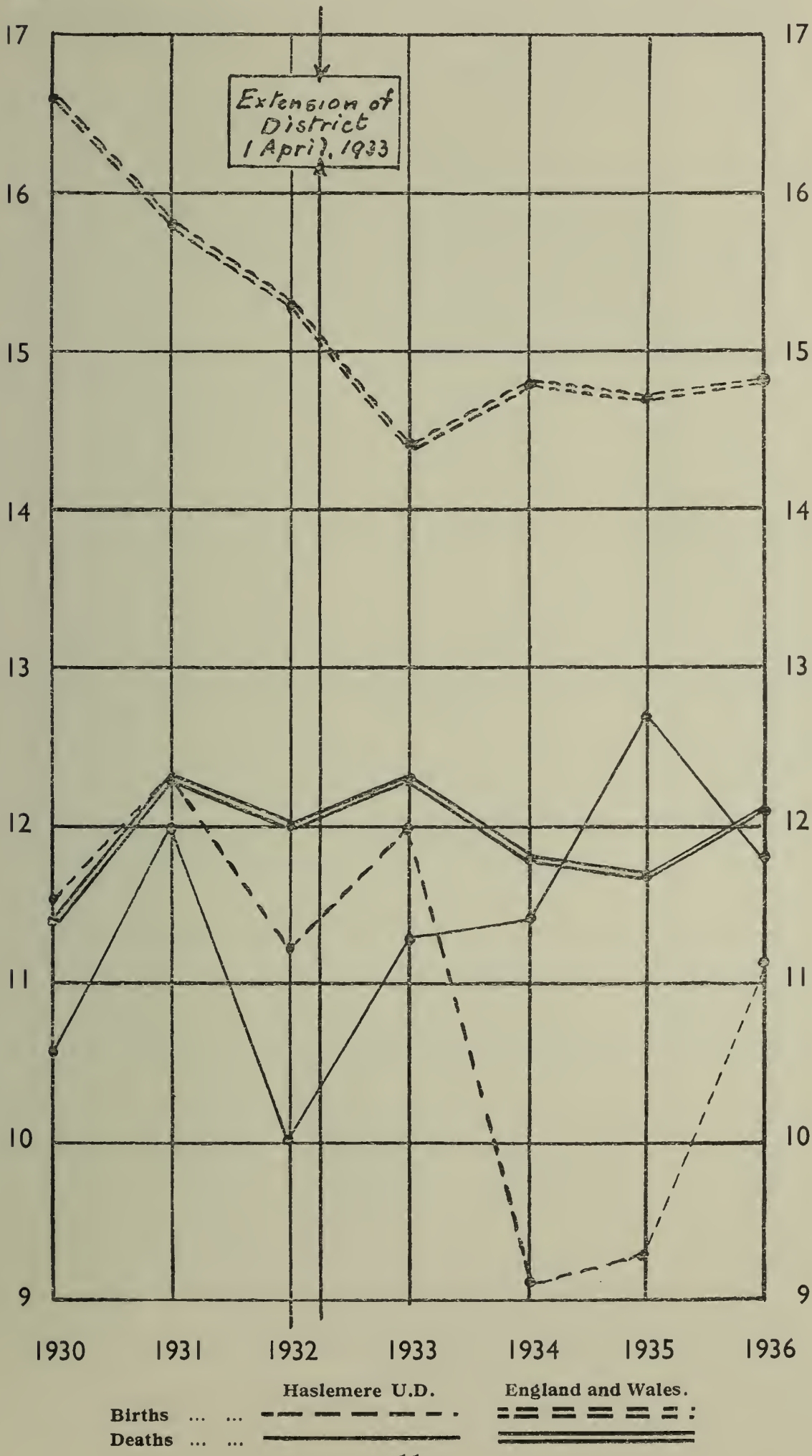
	Annual Rates per 1,000 of the Population.						Maternal Mortality per 1,000 total Births	
	Birth-Rate		Death-Rate		Infantile Mortality			
	1936	1935	1936	1935	1936	1935	1936	1935
Haslemere U.D.	11.19	9.31	Crude 11.80 Compar-able 10.03	Crude 12.74 Compar-able 10.83	56	34	0.00	0.0
England and Wales	14.8	14.7	12.1	11.7	59	57	3.81	4.1

TABLE II.  
CAUSES OF DEATH DURING 1936 (All Ages).  
(Figures supplied by the Registrar-General.)

Cause of Death.		Male	Female	Total
1.	Typhoid and paratyphoid fevers	—	—	—
2.	Measles ... ..	—	—	—
3.	Scarlet Fever ... ..	—	—	—
4.	Whooping-cough ... ..	—	—	—
5.	Diphtheria ... ..	—	—	—
6.	Influenza ... ..	1	1	2
7.	Encephalitis lethargica ... ..	—	—	—
8.	Cerebro-spinal fever ... ..	—	—	—
9.	Tuberculosis of respiratory system	2	5	7
10.	Other tuberculous diseases ... ..	—	—	—
11.	Syphilis ... ..	—	—	—
12.	General paralysis of the insane, tabes dorsalis ... ..	—	—	—
13.	Cancer, malignant disease ... ..	6	6	12
14.	Diabetes ... ..	—	—	—
15.	Cerebral hæmorrhage, etc. ... ..	2	7	9
16.	Heart disease ... ..	12	11	23
17.	Aneurysm ... ..	—	1	1
18.	Other circulatory diseases ... ..	7	7	14
19.	Bronchitis ... ..	2	3	5
20.	Pneumonia (all forms) ... ..	1	4	5
21.	Other respiratory diseases ... ..	—	—	—
22.	Peptic ulcer ... ..	—	—	—
23.	Diarrhœa, etc. (under 2 years) ... ..	—	—	—
24.	Appendicitis ... ..	—	1	1
25.	Cirrhosis of liver ... ..	1	1	2
26.	Other diseases of liver, etc. ... ..	—	1	1
27.	Other digestive diseases ... ..	1	—	1
28.	Acute and chronic nephritis ... ..	2	2	4
29.	Puerperal sepsis ... ..	—	—	—
30.	Other puerperal causes ... ..	—	—	—
31.	Congenital debility, premature birth, malformations, etc. ... ..	2	2	4
32.	Senility ... ..	2	1	3
33.	Suicide ... ..	2	1	3
34.	Other violence ... ..	2	3	5
35.	Other defined diseases ... ..	3	7	10
36.	Causes ill-defined or unknown ... ..	—	—	—
All Causes ...		48	64	112



GRAPH SHOWING BIRTH- AND DEATH-RATES PER 1,000  
OF THE POPULATION FOR THE LAST SEVEN YEARS.



BIRTH-RATES, DEATH-RATES AND ANALYSIS OF MORTALITY DURING THE YEAR 1936.

The maternal mortality rates for England and Wales are as follows :

# GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA.

## LABORATORY FACILITIES.

**Pathological Examinations.**—The arrangements for the examination of all pathological specimens at the Clinical Research Association in London continue to work satisfactorily.

The following are the numbers of examinations made during the year.:

Scarlet Fever	...	...	...	...	...	...	...	30
Diphtheria	...	...	...	...	...	...	...	12
Tuberculosis	...	...	...	...	...	...	...	7
Fæces	...	...	...	...	...	...	...	—
Miscellaneous	...	...	...	...	...	...	...	—
Total	...	...	...	...	...	...	...	49

**Milk Analysis.**—This work is carried out by the Clinical Research Association, Limited, Watergate House, York Buildings, Adelphi, London, W.C.2. Thirty-eight samples were examined during the year.

**Water Analysis.**—The Analytical Laboratory, 16, Southwark Street, London, S.E.1, undertakes the examination (bacteriological and chemical) of samples of water. During the year 3 samples were examined.

## AMBULANCE FACILITIES.

Particulars are given below of the ambulance services operating in the district :

(i) Ambulance provided by the Haslemere Urban District Council available for Accident Cases and Cases of a Non-Infectious Character.

Name of Authority	No. of Ambulances	Address of Ambulance Station	Telephone Number
Haslemere Urban District Council	1	Fire Station, Haslemere	Haslemere 291



ii. Ambulances available for Cases of Infectious Disease.

Name of Authority	No. of Ambulances	Address of Ambulance Station	Telephone Number
Farnham Joint Isolation Hospital Committee	1	Farnham Joint Isolation Hospital	Farnham 15

## NURSING IN THE HOME.

**Midwives.**—There are 22 midwives practising in the Urban District supervised by the County Medical Officer of Health. They are distributed in the following parishes :

Haslemere	...	...	...	13	Grayswood	...	...	1
Hindhead	...	...	...	1	Shottermill	...	...	7

**District Nurses.**—Six district nurses are available—three in Haslemere, one in Shottermill, one in Hindhead, and one in Grayswood. This service is administered by the County Nursing Association.

**Health Visitors.**—There is in the district a County Health Visitor who visits homes under the School Medical and Maternity and Child Welfare Services.

**Home Nursing of Public Assistance Cases.**—A scheme for the home nursing of Public Assistance cases is administered by the Surrey County Council. This scheme was described last year.

The County Medical Officer of Health, Dr. J. Ferguson, in his Annual Report for 1935, stated that the number of visits was considerably in excess of the preceding year. He anticipated that the scheme would become progressively more useful.

## CLINICS AND TREATMENT CENTRES.

**Maternity and Child Welfare.**—Centres within the district are as set out in the table below.

Centre	Address	Days of Centre
Haslemere	St. Christopher's Hall, Haslemere	Every Tuesday
Hindhead	Congregational Chapel Rooms, Beacon Hill, Hindhead	Every Friday



**Ante-natal Clinic.**—An Ante-natal Clinic is held at Haslemere twice monthly.

**Orthopædic Clinic.**—The Orthopædic Clinic is held at the Royal Surrey County Hospital, Farnham Road, Guildford. There is also a Curative Post at Farnham. The Assistant Medical Officer recommends suitable cases to the Orthopædic Clinic, where treatment is prescribed by the orthopædic surgeons. Where in-patient treatment is required, the children are usually admitted to the St. Nicholas' and St. Martin's Homes at Pyrford.

**Tuberculosis Dispensaries.**—Dispensaries at the Milford Sanatorium and at 49 Farnham Road, Guildford, serve the district. The days and times for the attendance of cases are as follows :

Milford Sanatorium.—2nd and 4th Fridays, 2 to 4 p.m.

49 Farnham Road, Guildford.—1st, 3rd and 5th Wednesdays at 10 a.m. Fridays at 10 a.m. 2nd and 4th Wednesdays at 5.30 p.m.

**Venereal Diseases Clinic.**—A clinic is established at the Royal Surrey County Hospital, Guildford : two sessions for males and one session for females are held every week. Free diagnosis and treatment is provided. Provision is made for enabling medical practitioners to obtain free of cost a bacteriological report on suspected material and for approved medical practitioners to be supplied with arseno-benzene preparations free of charge.

All of the above-noted clinics are administered by and under the control of the Surrey County Council.

## HOSPITALS.

The hospitals serving the district are as follows :

**General :** Haslemere and District Hospital, Haslemere.  
(Medical and Surgical. 62 beds).

**Infectious** Farnham Joint Isolation Hospital.  
(Extended and modernised, 1936. 40 beds).

**Disease :** Clandon Smallpox Isolation Hospital.

The extensions at the Farnham Isolation Hospital are not yet completed, but the new cubicle ward was almost ready at the end of the year. It is very satisfactory, and will enable the hospital to be put to much wider use than heretofore.

The arrangements for the transport of patients and for disinfection work smoothly and satisfactorily.

## HEALTH WEEK.

The Health Week held for the first time in 1935 proved so successful that a bigger effort was made this year. In addition to the posters displayed throughout the town, special efforts were directed towards health propaganda in schools. Attractive booklets,

leaflets and display posters were distributed and were much appreciated. Seals and labels for cleanliness—personal and of books and exercises—were eagerly sought in some of the schools and proved most successful.

Sound films were shown in the local cinemas, as in 1935, and included a striking film with a brief address by the Minister of Health.

In addition, a travelling cinematograph van was employed in Haslemere for the week and gave displays at various sites and, by the courtesy of the Education Authorities, at every school. This was a very valuable addition to our health propaganda service, and probably made more impression than all our other efforts.

Gratitude is due to the Health and Cleanliness Council for their valuable assistance, which made the Health Week so successful.

Propaganda of this nature is most valuable, and should be persisted in.

#### **MORTUARY.**

A Mortuary is maintained by the Council at Sickie Mill. It is ample for all requirements and is suitably and properly maintained. Eleven cases were dealt with during the year.

## SANITARY CIRCUMSTANCES OF THE AREA.

### WATER SUPPLY.

The water supply has been, during the whole of the year, sterilised with a slight dosage of chlorine. This is purely a precautionary measure, as, from the analyses, the water supply has been found to be quite pure without chlorination.

### DRAINAGE.

The small sewage disposal works at Grayswood, rebuilt last year, continues to give excellent results. The effluent is consistently as clear as spring water, whilst the watercourse into which it flows remains free from any sign of pollution.

#### Eight Acres Sewage Disposal Works.

The Eight Acres Housing Estate, Hindhead, consists of 52 houses, drained to a small sewage disposal plant on the Estate. This comprises a septic tank, dosing chamber, percolating filter and humus tank, and the effluent from same shows a high percentage of purification. The sewage being treated with this plant is exceptionally strong, but no nuisance has been created during the purification process, and the effluent is satisfactory.

#### Shottermill Sewage Works.

The Activated Sludge Plant at Shottermill has been turning out a satisfactory effluent. Certain modifications are required in connection with the treatment of storm water and the disposal of sludge, and the Council proposes to carry out the works necessary at an early date.

### RIVERS AND STREAMS.

No case of pollution came to the notice of the Health Department during the year.

### WATER SAMPLES REPORTS.

Edward Hinks, B.Sc., F.I.C.  
Public Analyst.

Analytical Laboratory,  
16 Southwark Street,  
London, S.E.1.

C. A. Best, Esq.,  
Surveyor,  
Haslemere U.D.C.

14th April, 1936.

REPORT on bacteriological examination of a sample of water received the 6th April, 1936, and marked :

“Tap. Venturi meter, Sturt Road, Haslemere.”

Number of micro-organisms per cubic centimetre growing on  
gelatine at 22° C.    ...    ...    ...    ...    ...    ...    ...    ...    3



Number of micro-organisms liquefying gelatine...	...	...	...	0
Number of micro-organisms per cubic centimetre growing on agar at 37° C.	...	...	...	1
B. coli	...	...	...	absent from 110 cubic centimetres
Streptococci	...	...	...	ditto.
B. welchii	...	...	...	absent from 100 cubic centimetres

This water is bacteriologically quite satisfactory.

(Signed) EDWARD HINKS.

#### WEY VALLEY WATER COMPANY.

Copy of Report from The Counties Public Health Laboratories,  
91 Queen Victoria Street, London, E.C.4.

Analysis of a sample of Water received on 9-7-36 from Wey Valley Water Company.

Labelled Apple House, Grayshott, Major Wessell.

Taken by W. Brooks. Witness, F. Etherington. Date 8-7-36,  
10.45 a.m.

#### Chemical Results in Parts per 100,000.

Appearance	...	...	...	Clear and Bright.
Colour	...	...	...	Normal.      Odour, None.
Reaction pH...	...	...	...	Neutral 7.2.    Free Carbonic Acid, 0.22.
Electric Conductivity				
at 20° C.	...	...	...	155.
Total Solids, 180° C.	...			10.5.
Chlorine in Chlorides	...			1.4.
Nitrogen in Nitrates	...			0.36.      Nitrites, Absent.
Hardness : Permanent				3.0.
Temporary				2.5.
Total	...			5.5.
Metals	...	...	...	Absent.
Free Ammonia	...	...		0.0000.
Albuminoid Ammonia				0.0000.
Oxygen Absorbed in 4				
hours at 80° F.	...			0.0000.

#### Bacteriological Results.

No. of Bacteria per c.c. :			
On Gelatine in 3 days			
at 20° C.	...	...	130.
On Agar in 1 day at			
37° C.	...	...	12.
The Bacillus coli	...	Present in —.	Absent in 100 c.c.
Bacillus welchii	...	Present in —.	Absent in 100 c.c.
(B. Enteritidis Sporogenes).			

**Report.**—This is a clear and bright, colourless water, neutral in reaction and soft in character. It is free from metals, contains no



excess of salinity and is of the highest degree of organic and bacterial purity.

The water is pure and wholesome, suitable for drinking and domestic purposes.

(Signed) E. V. SUCKLING  
(for Drs. Beale & Suckling).

### CLOSET ACCOMMODATION.

During the year four conservancy systems were connected to water carriage systems. The number of earth closets remaining at the end of the year was as follows :

Grayshott	...	...	...	155
Hindhead	...	...	...	167
Haslemere	...	...	...	30

### PUBLIC CLEANSING.

The arrangements for removal of nightsoil and cesspool emptying continue as before. This service works smoothly and satisfactorily.

### REFUSE COLLECTION.

The whole of the refuse from the Urban District is being disposed of by controlled tipping in a clay pit at Border Road, Haslemere. The method has been found to be quite satisfactory, but the area available is limited. The Council has a scheme awaiting sanction by the Minister of Health for the purchase of a large clay pit, and as soon as consent to the purchase is obtained work will be commenced to make the pit available.

### SANITARY INSPECTION OF THE AREA.

The Sanitary Inspector has supplied the following figures of inspections made during the year :

Number of inspections and re-inspections of :

Dwelling-houses	...	...	...	...	...	...	...	...	...	460		
Other premises	...	...	...	...	...	...	...	...	...	2,007		
Number of sundry visits and inspections not included above										50		
									Total	...	...	2,517

Number of dwelling-houses at which nuisances or defects were discovered	...	...	...	...	...	...	...	...	...	40
Number of other premises at which nuisances or defects were discovered	...	...	...	...	...	...	...	...	...	11
Total number of Statutory Notices served	...	...	...	...	...	...	...	...	...	2
Total number of Informal Notices served	...	...	...	...	...	...	...	...	...	28
Number of visits in connection with infectious diseases	...	...	...	...	...	...	...	...	...	18
Number of rooms disinfected	...	...	...	...	...	...	...	...	...	4

### Inspection of other premises :

Premises	No. on Register	No. of Inspections	Nuisances or Defects Found	Notices Served
Slaughter-houses ...	5	402	—	—
Butchers' shops ...	14	275	—	—
Bakehouses ... ..	8	184	—	—
Other Food Premises ... ..	—	320	3	—
Factories ... ..	22	160	3	3
Workshops & Outworkers' premises	55	207	1	1
Cowsheds, Dairies and Milkshops ...	4	340	5	—
Schools ... ..	—	51	—	—
Tents, Vans and Sheds ... ..	—	—	—	—
Piggeries ... ..	—	1	—	—
Smoke and Fume Observations ...	—	17	—	—
Offensive Trades ...	2	50	—	—

**Complaints.**—During the year 42 complaints were received. 92 visits were made in the investigation thereof and the necessary action taken.

## REPORT ON THE ADMINISTRATION OF THE FACTORY AND WORKSHOPS ACT, 1901.

### 1.—Inspection of Factories, Workshops and Workplaces.

Premises	Inspections	Written Notices	Occupiers Prosecuted
Factories (including Factory Laundries) ... ..	160	3	—
Workshops (including Workshop Laundries) ... ..	391	1	—
Workplaces (other than Outworkers' premises) ... ..	—	—	—
Totals ... ..	551	4	—

**2.—Defects found in Factories, Workshops and Workplaces.**

Particulars	Defects Found	Defects Remedied
Sanitary Accommodation : Insufficient...	—	—
Sanitary Accommodation : Unsuitable or defective ... ..	2	2
Sanitary Accommodation : Not separate for sexes ... ..	—	—
Other nuisances ... ..	2	2
Totals ... ..	4	4

**OFFENSIVE TRADES.**

The trades of fish-frying and marine storekeeper are declared offensive trades in this District.

There is now no marine store in the District, but there are two fish-frying businesses, and these are conducted in a satisfactory manner, 50 inspections having been made.

During the year an application was made for the establishment of another fish-frying business in Shottermill, but the application was later withdrawn.

**BAKEHOUSES.**

There are eight bakehouses in the district and 184 visits of inspection were made to ensure that the premises were kept in a satisfactory manner.

**SHOPS.**

The Sanitary Inspector made 60 inspections under the Shops Act, 1934. In only one instance was further action necessary, namely, the serving of a preliminary notice requesting the provision of a sanitary convenience at a fish shop. The notice was complied with.

Under this Act the Local Sanitary Authority is responsible for ensuring that there is adequate ventilation, warming and sanitary conveniences, whilst the County Council controls other conditions, including lighting, washing facilities, seating accommodation, hours of employment, etc.

**SMOKE ABATEMENT.**

Seventeen observations were made for smoke nuisance, but no nuisance under the Council's bye-law was discovered.



## **SWIMMING BATHS AND POOLS.**

The private swimming pool at Whitmore Vale, reported on unfavourably last year, has been extensively altered in accordance with suggestions made then, and is now reasonably satisfactory. The inflowing stream which was polluted has been diverted to flow round the pool, which is consequently now a closed pond. The edges have been suitably protected, and no surface water flows into the pond. Its large size makes this pool now reasonably satisfactory, having regard to the small number of bathers and the very limited use to which it is put.

Plans are proceeding for the construction of an open-air swimming pool at the Camelsdale Recreation Ground, and it is hoped that these will mature during 1937.

## **SCHOOLS.**

Sanitary conditions generally are reasonably satisfactory.

At the Grayswood School (commented upon in last year's Annual Report) arrangements have now been made for conversion of the earth closets to water carriage system.

No schools were closed during the year on account of infectious disease.

Table IV on page 30 shows the numbers of children absent from school suffering, or suspected to be suffering, from any infectious or contagious disease, including contacts with cases of infectious disease.

## **ERADICATION OF BED BUGS.**

In October it was found that tenants who had moved from a Council house in High Lane into a larger one in High Lane were infested with bugs. Associated Fumigators Ltd., of London, were immediately asked to disinfect with hydrogen cyanide both the houses. This work was done the following day and has been most satisfactory. The expeditious and thorough manner of their fumigation is much to be commended.

## **RATS AND MICE (DESTRUCTION) ACT, 1919.**

Under this Act, which is primarily administered by the County Council, 24 visits were paid to premises in the District and advice given. Several complaints were referred to the County Rat Officer.

## **PETROLEUM (CONSOLIDATION) ACT, 1928.**

The Petroleum Officer, who is also the Sanitary Inspector, has supplied the following report :

"There are 50 premises licensed for the storage of petroleum spirit. From 24 of these petrol is sold, while at the other 26 premises petrol is stored for private use only. Five licences were issued for the storage of carbide of calcium—one for private use and four for the purposes of sale. 90 visits were made in all."



# HOUSING.

## HOUSING TABLES.

### 1.—Inspection of Dwelling-houses during the Year.

(1) (a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) ... ..	363
(b) Number of inspections made for the purpose ...	460
(2) (a) Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 ... ..	348
(b) Number of inspections made for the purpose ...	445
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation ... ..	2
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation ... ..	24

### 2.—Remedy of Defects during the Year without Service of Formal Notices :

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers ... ..	60
--	----

### 3.—Action under Statutory Powers during the Year :

#### A.—Proceedings under Sections 17, 18 and 23 of the Housing Act, 1930.

(1) Number of Dwelling-houses in respect of which notices were served requiring repairs ... ..	0
(2) Number of dwelling-houses which were rendered fit after service of formal notices :	
(a) By owners ... ..	0
(b) By Local Authority in default of owners	0

#### B.—Proceedings under Public Health Acts :

(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied ... ..	0
(2) Number of dwelling-houses in which defects were remedied after service of formal notices :	
(a) By owners ... ..	0
(b) By Local Authority in default of owners	0

C.—Proceedings under Sections 19 and 21 of the  
Housing Act, 1930.

(1) Number of dwelling-houses in respect of which Demolition Orders were made ... ..	0
(2) Number of dwelling-houses demolished in pursuance of Demolition Orders ... ..	0

D.—Proceedings under Section 84 of the  
Housing Act, 1935.

(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made ... ..	0
(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit ... ..	0

4.—Housing Act, 1935. Overcrowding.

(a) (i) Number of dwellings overcrowded at the end of the year ... ..	2
(ii) Number of families dwelling therein ... ..	2
(iii) Number of persons dwelling therein ... ..	14
(b) Number of new cases of overcrowding reported during the year ... ..	0
(c) (i) Number of cases of overcrowding relieved during the year ... ..	12
(ii) Number of persons concerned in such cases ...	53
(d) Particulars of any cases in which dwelling-houses have again become overcrowded after the Local Authority have taken steps for the abatement of overcrowding ... ..	Nil
(e) Any other particulars with respect to overcrowding conditions upon which the Medical Officer of Health may consider it desirable to report:—	

Of the 14 cases originally discovered, only two remain. Of these, one should be permitted under a temporary licence, as it will relieve itself before long by the marriage of grown-up sons and daughters. Four new cases have developed due to children attaining the age of ten.

# INSPECTION AND SUPERVISION OF FOOD.

## MILK SUPPLY.

At the end of the year there were 11 cowkeepers and 15 milk retailers in the District, whilst 18 retailers from outside sell milk within the District.

340 inspections were made during the year.

Various improvements to buildings have been effected by several producers, and it has not been necessary to serve any notice under the Milk and Dairies Acts and Orders.

38 samples of milk were taken, and the results prove that a high standard is being maintained in this District. Of these samples, eight were taken at the request of the Ministry of Health from a producer of "Certified" (now "Tuberculin Tested") Milk. Two samples of pasteurized milk taken and submitted to the Phosphatase test proved satisfactory.

Milk Produced in District.				Milk Produced outside District			
Highest bacterial count	81,000			Highest bacterial count	111,660		
Lowest	"	"	180	Lowest	"	"	17,600
Average	"	"	15,599	Average	"	"	49,631

The following licences were granted for the sale of milk under the Milk (Special Designations) Order :

Dealer's licence for Certified Milk	...	...	...	...	5
" " " Grade "A" (T.T.)	...	...	...	...	4
" " " Grade "A"	...	...	...	...	1
Supplementary Licence for Tuberculin Tested	...	...	...	...	1
" " " Pasteurised	...	...	...	...	1
Licence to Pasteurise Milk	...	...	...	...	1

## ICE CREAM.

Four samples of ice cream sold in the District were taken for analyses and the reports showed them to be of a safe and wholesome character.

## MEAT AND OTHER FOODS.

There are 14 butchers' shops and five slaughterhouses, all of which are kept in a satisfactory manner. 677 visits have been paid by the Sanitary Inspector to these premises. Of these visits 402 were made at the time of slaughtering, when the following carcasses were examined :

Beasts	...	...	...	...	220
Calves	...	...	...	...	80
Sheep	...	...	...	...	1,082
Swine	...	...	...	...	962



The carcasses generally were of a high quality, and only the undermentioned were condemned and destroyed as being unfit for food :

2 pigs' carcasses and organs ... ..	Acute Swine Erysipelas
5 small pigs' carcasses and organs ...	Swine Fever
5 pigs' heads ... ..	Tuberculosis
1 fore-quarter of beef ... ..	Tuberculosis
1 beast's liver ... ..	Cirrhotic

Under the Slaughter of Animals Act, 1933, 12 slaughtermen were licensed for one year to slaughter animals.

**Other Foods.**—One barrel of apples affected with Rot and seven stone of decomposed herrings were condemned and destroyed as being unfit for food.

### FOOD AND DRUGS (ADULTERATION) ACT, 1928.

This Act is administered by the Surrey County Council, and I am indebted to the County Medical Officer of Health for the information in the table below showing the number of samples analysed and action taken in respect of the District.

Return of Samples Analysed during Year ended 31st December, 1936.

Articles	Analysed			Adulterated or Deteriorated			Prosecutions	Convictions
	For- mal	In- formal	Total	For- mal	In- formal	Total		
Milk ... ..	42	2	44	3	—	3	—	—
Ice Cream ...	—	1	1	—	—	—	—	—
Totals ...	42	3	45	3	—	3	—	—



## PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES.

---

### GENERAL.

The total number of cases of infectious disease (excluding tuberculosis) brought to the notice of the Health Department during 1936 was 9, as against 22 in 1935—a decrease of 13 cases. This decrease was due mainly to the fact that only 5 cases of scarlet fever occurred as against 11 in 1935.

Table V on page 31 shows the age-incidence of the notified cases.

The graph on page 32 illustrates the incidence of infectious disease during the last seven years.

The death-rate from the seven principal zymotic diseases per 1,000 of the population was 0.00 as against 0.0 in 1935.

It is unfortunate that information about non-notifiable diseases is seldom complete, nor is it received as promptly as one would like. Indeed, one of the things most required is a reliable and speedy information service, and, similarly, a means of rapid approach to the public. Information of such diseases as measles, which is not notifiable (nor has experience shown it to be helpful in localities where it is notifiable) is obtained from school notifications and from casual information supplied by practitioners. This latter source is much appreciated, and one can only wish that it were more regular and organised. I believe that much good could be done by giving prompt information to the public of matters affecting the general health, but, unfortunately, there is no machinery for doing this. Distribution of literature, announcements at meetings and so on are too haphazard and generally too slow in reaching those most affected.

### SCARLET FEVER.

Five cases were notified during the year, 6 less than in 1935. The notification rate per 1,000 of the population, in 1936, was 0.53, for 1935 the rate was 1.18.

**Scarlet Fever Immunization.**—At the end of the year a scheme of immunization against scarlet fever was adopted, a similar scheme having been recently commenced in the adjoining districts. Scarlet fever has not been prevalent in Haslemere for a good many years, so that most of the children must be susceptible. An epidemic would have every likelihood of spreading rapidly. Experience of scarlet fever in recent years has shown the extreme difficulty of control, because there are so many mild cases and so many which remain unrecognised. It is not suggested that the proposals will prevent the spread of an epidemic, but they may prevent an epidemic from beginning or, at least, prevent multiple cases in families.

The scheme is to immunize susceptible members in an infected family as soon as the first case of scarlet fever is recognised. There are two methods. The first is by a single injection of anti-toxin (as in the case of diphtheria) which gives immediate immunity though of very brief duration, lasting only two or three weeks. The second method is slower, but the resultant immunity is expected to last for some years. It consists of five hypodermic injections of streptococcus toxin given at weekly intervals. The course can be commenced immediately, or, if the anti-toxin is given, two or three weeks later.

It is impossible to advise wholesale immunization of school children against scarlet fever on account of the number of injections necessary, the expense involved, and the greater risk of reactions, though these are seldom serious and generally last only two or three hours. The scheme is to be operated by general practitioners, to whom the anti-toxin is available free of charge in exactly the same way as diphtheria anti-toxin, whilst the streptococcus toxin is supplied free of charge and the following fees paid by the local authority :—

For treating one member of a family	...	2/6 per injection
For treating subsequent members of the		
family at the same time	... ..	1/- ..

## DIPHTHERIA.

No cases of diphtheria were notified during 1936, as compared with one in the previous year.

The graph on page 32 shows the incidence of diphtheria over the last seven years.

**Diphtheria Immunization.**—The policy of immunizing children against diphtheria was proceeded with during the year on lines similar to those of 1935. Every entrant at the Council Schools has been offered immunization, either as a free treatment given by the Medical Officer of Health or as a private service from the child's own medical attendant, the material only being supplied free of charge.

Number offered immunization	... ..	171
Number immunized by Medical Officer of		
Health	... ..	112
Number immunized by own doctors	...	0
Percentage of acceptances	... ..	65%

Schick testing was completed in 66 cases. It is, unfortunately, impossible to Schick test every child, although the importance of Schick testing subsequent to immunization cannot be over emphasised. Many of the children have left school, or are absent, at the time Schick testing is performed two or three months after the initial treatment.



Number Schick tested	...	...	...	...	66
Number positive	...	...	...	...	3
Number negative	...	...	...	...	60
Number absent at inspection	...	...	...	...	3
Number successfully immunized	...	...	...	...	60
Percentage successfully immunized	...	...	...	...	95%

Schick testing was left until a later date this year in order to prove that children showing immunity shortly after the immunization did not relapse into a state of susceptibility. It is particularly interesting to note that, with a longer interval, the results are even better than in the previous year, which showed 91% of success.

It has been observed in some districts where immunization by the "one shot" (alum precipitated toxoid) method has been used that results have not been nearly so successful as we have found in Haslemere. After careful enquiry I felt that much of this lack of success was due to the actual immunizing precipitate adhering to the glass of the vials. In many cases even prolonged shaking fails to remove the sediment. In such cases, obviously, immunizing material remains in the vial and is never injected into the patient at all. To obviate this I suggested that twice as much fluid should be used, namely 1 c.c. instead of  $\frac{1}{2}$  c.c. The material is now supplied in this form, and the difficulty referred to above largely overcome. It is interesting to note that the results show a definite improvement, and it is felt that possibly it is due to this alteration.

Requests received from Infant Welfare Centres at Hindhead and Haslemere for immunization of children under school age were gladly acceded to. It is infinitely better to treat children from 1-4 years of age rather than to wait until they attend school. There is practically no risk of any reaction following the injection, and the children are protected from an earlier age. There is every reason to believe that such protection will carry the child throughout its school life. Experience has shown that the vast majority of children below four years of age are susceptible to diphtheria.

Centre.	No. Immunized.
Beacon Hill, Hindhead	37
St. Christopher's Hall, Haslemere (actually done at Council Offices, Haslemere)	49

These small children were not Schick tested, as it is difficult with such small children, and it means two extra visits by the mother for this purpose alone. Moreover, it is intended that all these children shall be Schick tested when they attend school. The results then will be particularly interesting after the lapse of some years.

The total number of children immunized in the Haslemere Urban District since the beginning of the scheme in 1934 is 798. It is estimated that this represents nearly 70 per cent. of all children in Haslemere, a percentage that ought to eliminate the risk of an epidemic spread of diphtheria.

The method originally used, namely a single injection of alum precipitated toxoid, has continued to prove completely satisfactory. It is easy, it involves only a single treatment, and no reactions at all have occurred this year, whilst the percentage of success has been high. Parents have now complete confidence in the procedure, and I am grateful for their co-operation and, even more particularly, for the encouragement of the head teachers in the schools. These factors have been important in ensuring the success of the scheme.

#### PUERPERAL PYREXIA.

One case was notified during the year, occurring in the Haslemere Hospital. There were no deaths from this disease.

#### SCHOOL ABSENTEES.

The following table shows the numbers of children absent from school suffering, or suspected to be suffering, from any infectious or contagious disease, including contacts with cases of infectious disease. This form of notification, which is received from head teachers, is of the greatest value, as it gives information concerning the occurrence of infectious diseases not otherwise notifiable and occasionally acts as a check on notifications of infectious disease by medical practitioners.

TABLE IV.  
SCHOOL ABSENTEES.

School.	Scarlet Fever.	Diphtheria.	Measles.	Conjuncti- vitis	Whooping- cough.	Chicken- pox.	Impetigo	Totals
Grayswood C. of E. ...	—	—	—	—	—	—	—	—
Haslemere C. of E. (Inf.)	—	—	9	2	3	—	—	14
Haslemere C. of E. (Sen.)	1	—	8	—	—	—	1	10
Hindhead Council ...	—	—	90	—	5	—	—	95
Shottermill Council ...	—	—	14	2	—	—	—	16
Totals ...	1	—	121	4	8	—	1	135



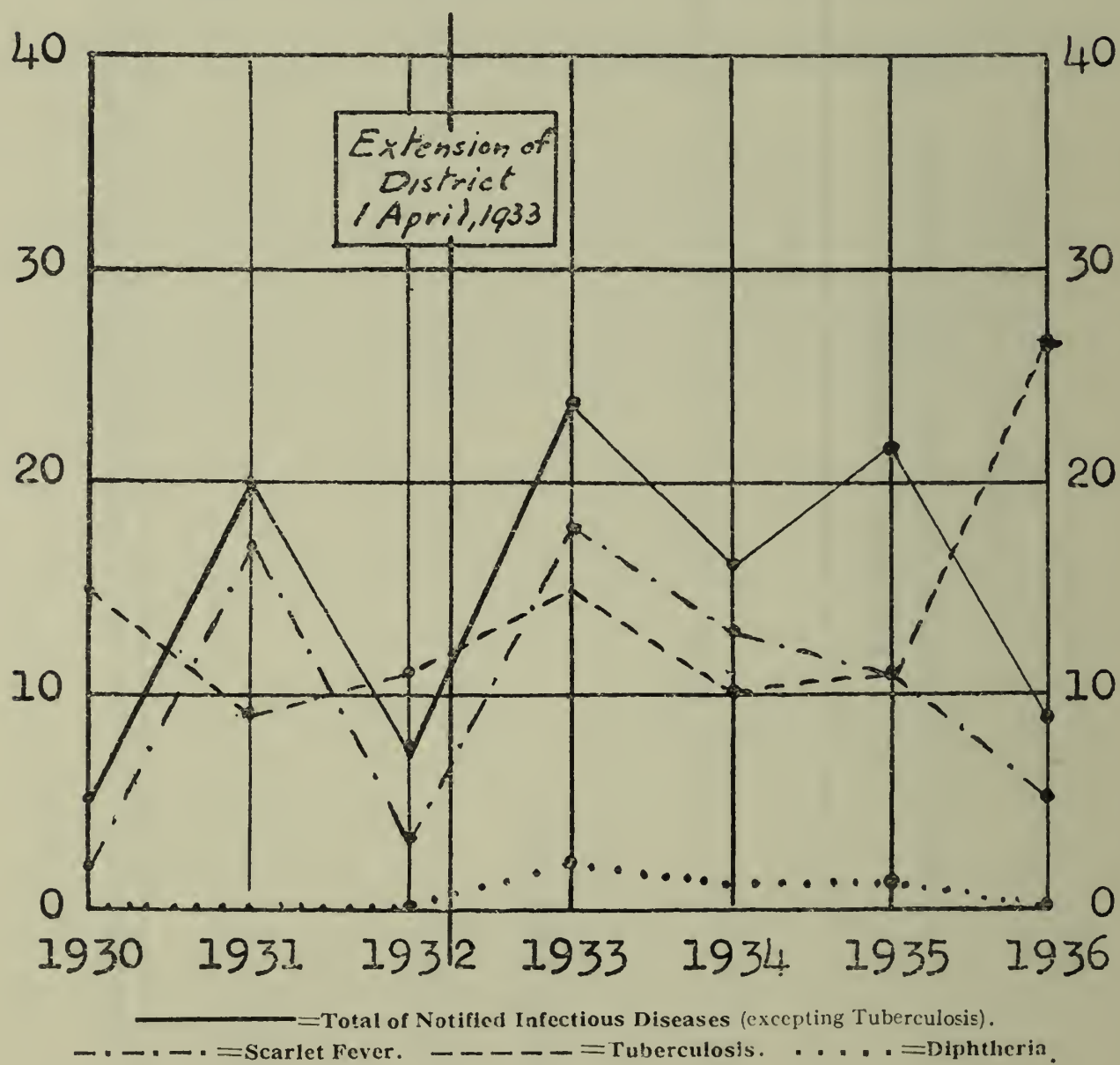
TABLE V.

INFECTIOUS DISEASE, 1935.—AGE INCIDENCE.  
(Excepting Tuberculosis.)

NOTIFIABLE DISEASE	At all Ages	At Ages—Years.												Cases admitted to Hospital	Deaths	
		under 1	1-2	2-3	3-4	4-5	5-10	10-15	15-20	20-35	35-45	45-65	65 and Over			
Smallpox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	5	—	1	—	—	1	1	—	—	—	—	—	—	—	—	—
Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Enteric Fever (including Paratyphoid)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Pneumonia	1	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—
Acute Anterior Poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas...	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Undulant Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cerebro-Spinal Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Malaria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Ophthalmia Neonatorum	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Encephalitis Lethargica	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Totals	9	1	1	1	—	1	1	1	1	1	—	1	—	—	4	5

\* This demonstrates the fact that medical attendants do not always notify cases of pneumonia.

GRAPH SHOWING INCIDENCE OF NOTIFIED INFECTIOUS DISEASES DURING THE LAST SIX YEARS.



# CANCER.

There were 12 deaths from malignant disease during 1936—six male and six female (according to Registrar-General's figures). The age incidence of eleven of these persons whose deaths have been traced through this department is shown in the table below.

## TOTAL DEATHS FROM CANCER.

Site	20-30		30-40		40-50		50-60		60-70		70-80		Over 80		Totals		Grand Total
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Alimentary	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Breast ...	-	-	-	1	-	-	-	1	-	-	-	-	-	-	-	2	2
Lung ...	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	-	1
Liver ...	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	-	1
Tongue ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other...	-	-	-	-	-	-	1	1	1	2	1	-	1	-	4	3	7
Totals ...	-	-	-	1	-	-	1	2	1	2	3	-	1	-	6	5	11

The following table shows the number of deaths from cancer during the last three years :

Year			Male	Female	Total	Death-Rate
1934	...	...	7	9	16	1.72
1935	...	...	5	9	14	1.49
1936	...	...	6	6	12	1.27

The efforts of the British Empire Cancer Campaign to enlighten the general public are welcomed. A panel of lecturers throughout the District has been arranged and lectures are given wherever sufficient interest is aroused, particularly to Women's Institutes and other similar organisations. The Medical Officer of Health acts as Honorary Secretary for the scheme in this District.

## PREVENTION OF BLINDNESS.

There was no cause for any action to be taken under Section 66 of the Public Health Act, 1925, regarding the prevention of blindness and the treatment of persons suffering from disease or injury to the eye.

## TUBERCULOSIS.

There were 60 cases on the Register at the end of 1936—namely, 23 males and 37 females.

The following table shows the numbers and types of cases on the Register at 31st December, for the last four years:

Year	Pulmonary		Non-Pulmonary		Total Number on Register at December 31st
	Male	Female	Male	Female	
1933 ...	11	17	5	1	34
1934 ...	14	15	6	2	37
1935 ...	15	15	6	2	38
1936 ...	18	30	5	7	60

During 1936 there were 27 new cases (primary and others) as against 10 in 1935.

The large increase in the number of new cases during the year is to a great extent due to the fact that several cases in the Holy Cross Sanatorium, who had been there for some years, were found not to have been notified before, and formal notification was therefore necessary.

Table VI on page 36 shows the new cases and deaths in age-periods—pulmonary and non-pulmonary figures are given separately.

There were five deaths from tuberculosis, as against five in 1935.

The following table shows the notifications and deaths in the District, with the corresponding rates per 1,000 of the population, during the past three years:

Year	Cases Notified	Notification Rate	Deaths	Death-Rate per 1,000 of the population
1934 ...	10	1.10	4	0.43
1935 ...	11	1.18	5	0.54
1936 ...	27	2.85	5	0.53



**PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS,  
1925.**

No action was necessary under the Public Health (Prevention of Tuberculosis) Regulations, 1925 (relating to persons suffering from pulmonary tuberculosis employed in the milk trade).

**SECTION 62, PUBLIC HEALTH ACT, 1925.**

No action was necessary under this section, which relates to the compulsory removal to a hospital of persons suffering from tuberculosis.

TABLE VI.  
NEW CASES AND MORTALITY OF TUBERCULOSIS.

Age Periods	New Cases*				Deaths†			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	Male	Female	Male	Female	Male	Female	Male	Female
0—1	—	—	—	—	—	—	—	—
1—5	—	—	—	2	—	—	—	—
5—15	—	—	—	1	—	—	—	—
15—25	1	4	—	1	—	1	—	—
25—35	1	4	—	1	—	—	—	—
35—45	1	6	—	—	1	1	—	—
45—55	—	2	—	—	—	—	—	—
55—65	—	2	—	—	—	1	—	—
65 and over	1	—	—	—	1	—	—	—
Unknown	—	—	—	—	—	—	—	—
Totals ... ..	4	18	—	5	2	3	—	—

\* Of these, 14 were primary notifications, 7 were persons from other areas who had come to reside in the Haslemere Urban District during the year, and 6 were cases notified after death (i.e. from death returns, etc.).

† The ratio of non-notified tuberculosis deaths to total tuberculosis deaths was 5 to 5, or 1 in 1.



